

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

21ST CENTURY PAC

ADDRESS (number and street)

2052 Lake Audubon Court

☐Check if different
than previously
reported. (ACC)

Reston

VA

20191

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00315747

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

05

01

2009

through

05

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Lisa Lisker

Signature of Treasurer

Electronically Filed by Lisa Lisker

Date

06

18

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
21ST CENTURY PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		32352.95
(b) Cash on Hand at Beginning of Reporting Period	32639.77	
(c) Total Receipts (from Line 19)	25000.00	147700.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	57639.77	180052.95
7. Total Disbursements (from Line 31)	9802.67	132215.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	47837.10	47837.10
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
21ST CENTURY PAC

Report Covering the Period:

From:

M M D D Y Y W Y
0 5 0 1 2 0 0 9

To:

M M D D Y Y W Y
0 5 3 1 2 0 0 9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	52000.00
(i) Itemized (use Schedule A)	0.00	200.00
(ii) Unitemized	0.00	52200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	25000.00	95500.00
(c) Other Political Committees (such as PACs)	25000.00	147700.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	25000.00	147700.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	25000.00	147700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25000.00	147700.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	9802.67	117215.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	9802.67	117215.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	15000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9802.67	132215.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9802.67	132215.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	25000.00	147700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25000.00	147700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9802.67	117215.85
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9802.67	117215.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 21ST CENTURY PAC

A.

Full Name (Last, First, Middle Initial)
 AEGON USA INC POLITICAL ACTION COMMITTEE
 Mailing Address 1111 North Charles Street

City State Zip Code
 Baltimore MD 21201

FEC ID number of contributing
federal political committee.

C C00236414

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 7 / 2 0 0 9

Transaction ID: SA11C.8459

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
 AMERICAN BENEFITS COUNCIL POLITICAL ACTION COMMITTEE
 Mailing Address 1212 NEW YORK AVENUE NW SUITE 1250

City State Zip Code
 WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00153171

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 9 / 2 0 0 9

Transaction ID: SA11C.8469

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
 AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE
 Mailing Address 101 Constitution Ave. NW
 Suite 700

City State Zip Code
 Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00147066

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 9 / 2 0 0 9

Transaction ID: SA11C.8467

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
 21ST CENTURY PAC

A.

Full Name (Last, First, Middle Initial)
 AMERICAN INDIAN SOVEREIGNTY SELF-DETERMINATION
 Mailing Address 224 2ND STREET SE

City State Zip Code
 WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00367177

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 3 / 2 0 0 9

Transaction ID: SA11C.8465

Amount of Each Receipt this Period

2000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
 FINANCIAL SERVICES ROUNDTABLE PAC
 Mailing Address 1001 Pennsylvania Avenue NW
 Suite 500 South

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00193177

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 7 / 2 0 0 9

Transaction ID: SA11C.8455

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
 GENERAL ATOMICS POLITICAL ACTION COMMITTEE
 Mailing Address Po Box 85608

City State Zip Code
 San Diego CA 92186

FEC ID number of contributing
federal political committee.

C C00215285

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 3 / 2 0 0 9

Transaction ID: SA11C.8466

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
 21ST CENTURY PAC

A.

Full Name (Last, First, Middle Initial)
 HOME DEPOT INC. POLITICAL ACTION COMMITTEE, THE

Mailing Address 101 Constitution Ave. NW
 Suite 800 West

City State Zip Code
 Washington DC 20001

FEC ID number of contributing
 federal political committee.

C C00284885

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 7 / 2 0 0 9

Transaction ID: SA11C.8461

Amount of Each Receipt this Period

4000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
 MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 State Street

City State Zip Code
 Springfield MA 01111

FEC ID number of contributing
 federal political committee.

C C00118943

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 7 / 2 0 0 9

Transaction ID: SA11C.8460

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
 METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A

Mailing Address 27-01 Queens Plaza North
 Area 4D

City State Zip Code
 Long Island City NY 11101

FEC ID number of contributing
 federal political committee.

C C00040923

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 9 / 2 0 0 9

Transaction ID: SA11C.8468

Amount of Each Receipt this Period

2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
 21ST CENTURY PAC

A.

Full Name (Last, First, Middle Initial)
 PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 700 Newport Center Drive

City State Zip Code
 Newport Beach CA 92660

FEC ID number of contributing
federal political committee. **C** C00068528

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 7 / 2 0 0 9

Transaction ID: SA11C.8457

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
 PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL PAC)

Mailing Address 751 Broad Street
 14th Floor

City State Zip Code
 Newark NJ 07102

FEC ID number of contributing
federal political committee. **C** C00127779

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 7 / 2 0 0 9

Transaction ID: SA11C.8456

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
 USAFARMWORKERPAC

Mailing Address 8 REGINALD CIRCLE

City State Zip Code
 ROCHESTER NY 14625

FEC ID number of contributing
federal political committee. **C** C00377549

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 4 / 2 0 0 9

Transaction ID: SA11C.8454

Amount of Each Receipt this Period

2500.00

Contributio

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

21ST CENTURY PAC

A.

Full Name (Last, First, Middle Initial)

WESTERN ALLIANCE OF FARMWORKER ADVOCATES PAC (WAFA PAC)

Mailing Address PO BOX 1389

City

WINTON

State

CA

Zip Code

95388

FEC ID number of contributing
federal political committee.

C

C00407841

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 4 / 2 0 0 9

Transaction ID: SA11C.8453

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

25000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
21ST CENTURY PAC

A.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Credit Card Payment-See Memos

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8476

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

4073.45

B.

Full Name (Last, First, Middle Initial)
Sherton Hotels-Phoenix

Mailing Address 340 N. 3rd St.

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement
PAC Travel/Lodging

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8476.2

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

812.76

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Hertz Car Rental-Headquarters

Mailing Address 225 Brae Ave.

City Park Ridge State NJ Zip Code 07656

Purpose of Disbursement
PAC Car Rental

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8476.3

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

681.65

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

4073.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
21ST CENTURY PAC

A.

Full Name (Last, First, Middle Initial)
Hilton Garden Inn-Scottsdale

Mailing Address 7324 E. Indian School Rd.

City State Zip Code
Scottsdale AZ 85251

Purpose of Disbursement
PAC Lodging

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8476.4

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

205.67

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Capitol Hill Club

Mailing Address 300 1st St., SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement
PAC Event Catering

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8476.5

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

989.18

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 2345 Crystal Dr.

City State Zip Code
Arlington VA 22227

Purpose of Disbursement
PAC Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8476.6

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

110.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
21ST CENTURY PAC

A. Full Name (Last, First, Middle Initial) Costco	Transaction ID: SB21B.8476.8 Date of Disbursement																				
Mailing Address 1890 S. University Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	0	9												
City State Zip Code Davie FL 33324	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Event Catering/Decorations	<table border="1"> <tr> <td colspan="10">419.40</td> </tr> </table>	419.40																			
419.40																					
Candidate Name	<table border="1"> <tr> <td>003</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	003	Category/ Type																		
003																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																				
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB21B.8476.10 Date of Disbursement																				
Mailing Address PO Box 17120	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	0	9												
City State Zip Code Tucson AZ 85731	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Cell Phone	<table border="1"> <tr> <td colspan="10">205.80</td> </tr> </table>	205.80																			
205.80																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	001	Category/ Type																		
001																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																				
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Robert Cochran	Transaction ID: SB21B.8474 Date of Disbursement																				
Mailing Address 2052 Lake Audubon Ct.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	3		2	0	0	9												
City State Zip Code Reston VA 20191	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Travel	<table border="1"> <tr> <td colspan="10">185.01</td> </tr> </table>	185.01																			
185.01																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	002	Category/ Type																		
002																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

SUBTOTAL of Disbursements This Page (optional)

185.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
21ST CENTURY PAC

A. Full Name (Last, First, Middle Initial) NEBS	Transaction ID: SB21B.8478 Date of Disbursement																				
Mailing Address 2000 S. Thompson St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	0	9												
City Flagstaff State AZ Zip Code 86001	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Office Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">201.98</td> </tr> </table>	201.98																			
201.98																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.8470 Date of Disbursement																				
Mailing Address 911 Panorama Trail	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	1		2	0	0	9												
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Payroll Service Candidate Name	<table border="1"> <tr> <td colspan="10">91.39</td> </tr> </table>	91.39																			
91.39																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.8483 Date of Disbursement																				
Mailing Address 911 Panorama Trail	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	9		2	0	0	9												
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Payroll Taxes Candidate Name	<table border="1"> <tr> <td colspan="10">1288.76</td> </tr> </table>	1288.76																			
1288.76																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1582.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
21ST CENTURY PAC

A.

Full Name (Last, First, Middle Initial)
Tami Plofchan

Mailing Address 504 8th St., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
PAC Cell Phone/Travel

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8472

Date of Disbursement

05 / 11 / 2009

Amount of Each Disbursement this Period

316.88

B.

Full Name (Last, First, Middle Initial)
Tami Plofchan

Mailing Address 504 8th St., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
PAC Salary

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.8481

Date of Disbursement

05 / 28 / 2009

Amount of Each Disbursement this Period

3645.20

SUBTOTAL of Disbursements This Page (optional) ►

3962.08

TOTAL This Period (last page this line number only) ►

9802.67

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
21ST CENTURY PAC

A.

Full Name (Last, First, Middle Initial)
KEN CALVERT FOR CONGRESS

Mailing Address PO Box 20123

City Riverside State CA Zip Code 92516

Purpose of Disbursement
Redesignate: Contribution-Recount

Candidate Name
KENNETH S MR. CALVERT

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 44

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼
Recount

011
Category/
Type

Transaction ID: SB23.8515

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

-2000.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
KEN CALVERT FOR CONGRESS

Mailing Address PO Box 20123

City Riverside State CA Zip Code 92516

Purpose of Disbursement
Redesignate to 2010 Primary

Candidate Name
KENNETH S MR. CALVERT

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 44

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.8516

Date of Disbursement

05 / 01 / 2009

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

0.00